

DEC 11 2007



## FACSIMILE COVER SHEET

December 11, 2007

**Receiver:** Examiner Hanh N. Nguyen  
(USPTO Central Fax)

**TEL #:**

**FAX #:** 571-273-8300

**Sender:** Chereyce Brown, Patent Secretary to:  
Elise R. Heilbrunn

**Serial No.** 09/935,238  
**Our Ref. No.:** CISC215/97021

**Re:** Amendment C

**Pages Including Cover Sheet(s):** 17

**Fax Contents:** Fax Cover Sheet- 1 page  
Amendment Transmittal- 1 page  
Amendment C- 15 pages

**MESSAGE:**

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**CONFIDENTIALITY NOTE**

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Beyer Weaver LLP • 500 12th Street, Suite 200, Oakland, CA 94607 • Phone 510.663.1100 • Fax 510.663.0920 • [www.beyerlaw.com](http://www.beyerlaw.com)

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DEC 11 2007

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of: Sharan et al.

Attorney Docket No.: CISC215/97021

Application No.: 09/935,238

Examiner: Nguyen, Hanh N.

Filed: August 21, 2001

Group: 2616

Title: APPARATUS AND METHODS FOR  
SNIFFING DATA IN A CABLE HEAD END

Confirmation No.: 1220

**CERTIFICATE OF TRANSMISSION**

I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office, Attention: Examiner NGUYEN, HANH N. at facsimile number 571-273-8300 on December 11, 2007

Signed: 

Chereyca Brown

**AMENDMENT TRANSMITTAL**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

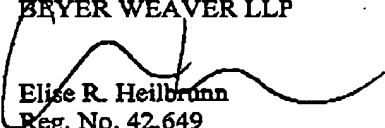
Transmitted herewith is an Amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims After Amendment		Highest Previously Paid For	Present Extra	Small Entity Rate Fee	Large Entity Rate Fee
Total Claims	59	MINUS	54	5	x 25 =	x 50 = 250
Independent Claims	4	MINUS	4	0	x 105 =	x 210 = 0
Multiple Dependent Claim Present and Fee Not Previously Paid						
Total					\$	\$250

- ☒ Applicant(s) hereby petitions for a two month extension(s) of time to respond to the aforementioned Office Action.
- ☒ Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 500388.
- ☐ Enclosed is our Check No. \_\_\_\_\_ in the amount of \$ \_\_\_\_\_ to cover the additional claim fee and/or extension of time fees.
- ☒ Please charge the required fees, or any additional fees required to facilitate filing the enclosed response, to Deposit Account No. 500388 (Order No. CISC215).

Respectfully submitted,  
BRYER WEAVER LLP

  
Elise R. Heilbrunn  
Reg. No. 42,649

P.O. Box 70250  
Oakland, CA 94612-0250